### Case 18-80368 Doc 1 Filed 02/26/18 Entered 02/26/18 16:50:38 Desc Main Document Page 1 of 53

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

## Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	D. Middle name  Cerasani Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Joe D. Cerasani	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5274	

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Debtor 1 Joseph D. Cerasani

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs			
5.	Where you live	802 Seven Hickory Road	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Ogle County	County			
If your m above, fi		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 Joseph D. Cerasani Case number (if known)

Par	t 2: Tell the Court About	Your E	Bankruptcy Ca	ise					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.  Chapter 7							
	choosing to file under								
			Chapter 11						
			Chapter 12						
			Chapter 13						
3.	How you will pay the fee					with the clerk's office in your local court for more			
				attorney is subn		urself, you may pay with cash, cashier's check, or llf, your attorney may pay with a credit card or che			
					allments. If you choose this optios (Official Form 103A).	n, sign and attach the Application for Individuals to	o Pay		
			but is not req applies to you	I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge ma but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line t applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.					
9.	Have you filed for bankruptcy within the	■ N	lo.						
	last 8 years?	ПΥ	es.						
			District		When	Case number			
			District		When	Case number			
			District	-	When	Case number			
10.	Are any bankruptcy	■ N	lo.						
	cases pending or being filed by a spouse who is								
	not filing this case with you, or by a business partner, or by an affiliate?		es.						
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your residence?	■ N	lo. Go to I	ine 12.					
	rediuerioe :	ПΥ	es. Has yo	our landlord obta	ined an eviction judgment against	you?			
				No. Go to line	12.				
				Yes. Fill out <i>Ini</i> this bankruptcy		ludgment Against You (Form 101A) and file it as p	art of		

Document Page 4 of 53 Case number (if known) Debtor 1 Joseph D. Cerasani Report About Any Businesses You Own as a Sole Proprietor Are you a sole proprietor ■ No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs

For example, do you own perishable goods, or livestock that must be fed, or a building that needs

urgent repairs?

immediate attention?

needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Joseph D. Cerasani

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 Joseph D. Cerasani **Answer These Questions for Reporting Purposes** Part 6: Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 **200-999** How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million ■ \$0 - \$50.000 □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Joseph D. Cerasani Signature of Debtor 2 Joseph D. Cerasani Signature of Debtor 1 Executed on February 26, 2018 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Joseph D. Cerasani

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

Case number (if known)

/s/ Daniel	A. Springer	Date	February 26, 2018
Signature of	Attorney for Debtor		MM / DD / YYYY
Daniel A. S	Springer		
Printed name			
Springer L	₋aw Firm		
Firm name			
5301 E. St	ate Street		
Suite 105			
Rockford,	IL 61108		
Number, Street,	City, State & ZIP Code		
Contact phone	815.312.4725	Email address	dspringerlaw@gmail.com
6314059 IL	-		
Bar number & S	tate		

			Faue 8 01 33
Fill in this infor	mation to identify your	case:	
Debtor 1	Joseph D. Cerasa	ani	
	First Name	Middle Name	Last Name
Debtor 2			
Spouse if, filing)	First Name	Middle Name	Last Name
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS
Case number _			

☐ Check if this is an amended filing

## Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	142,641.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	23,302.5
	1c. Copy line 63, Total of all property on Schedule A/B	\$	165,943.5
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	161,036.0
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	63,565.2
	Your total liabilities	\$	224,601.28
Par	t 3: Summarize Your Income and Expenses		
l.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,061.4
j.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,040.4
ar	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
<b>7</b> .	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	personal	, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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Case number (if known) Debtor 1 Joseph D. Cerasani

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 4,828.97 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	51,329.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	51,329.00

	Case 18-80368	B Doc 1		02/26/18 ument	Entered 02/26/1	L8 16:50	:38 Des	sc Main	
Fill in this i	information to identify	your case and th							
Debtor 1	Joseph D. C		e Name		Last Name				
Debtor 2 Spouse, if filing	g) First Name		e Name		Last Name				
Jnited State	es Bankruptcy Court for	the: NORTHER	RN DISTI	RICT OF ILLIN	IOIS				
Case numb	er								if this is an ded filing
_	Form 106A/B	-							12/15
nink it fits be nformation. I nswer every	est. Be as complete and a If more space is needed, a	accurate as possib attach a separate s	le. If two heet to th	married people nis form. On the	n asset fits in more than one are filing together, both are top of any additional pages n or Have an Interest In	equally resp	onsible for su	oplying corre	ect
	/here is the property?				_				
1.1 <b>802 S</b>	even Hickory Road		What		? Check all that apply				
	ddress, if available, or other des	cription		Single-family h Duplex or mult Condominium	i-unit building	the amount	uct secured cla of any secured Who Have Clain	l claims on Ś	chedule D:
<b>Byror</b> City	n IL State	61010-0000 ZIP Code		Manufactured of Land Investment pro	or mobile home	Current va entire prop \$14		Current val	
			Uho		in the property? Check one	(such as fe	he nature of yeesimple, tena e), if known.		•
Ogle			□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Debtor 2 only Debtor 1 and D At least one of	the debtors and another ou wish to add about this ite	Check (see ins	c if this is com structions)	munity prope	erty
			prope	erty identification	on number:				

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$142,641.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Debtor 1 Joseph D. Cerasani 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes **Dodge** Do not deduct secured claims or exemptions. Put Who has an interest in the property? Check one Make: the amount of any secured claims on Schedule D: Challenger Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2009 Year: Debtor 2 only Current value of the Current value of the 56,000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$17,500.00 \$17,500.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put **Dodge** Who has an interest in the property? Check one 3.2 Make: the amount of any secured claims on Schedule D: **Grand Caravan** Creditors Who Have Claims Secured by Property. ■ Debtor 1 only Model: 2003 Debtor 2 only Current value of the Current value of the portion you own? 200,000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? Other information: At least one of the debtors and another \$1,400.00 \$1,400.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Chevrolet Who has an interest in the property? Check one 3.3 Make: the amount of any secured claims on Schedule D: **Impala** Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2004 Year: Debtor 2 only Current value of the Current value of the 200,000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information:  $\square$  At least one of the debtors and another \$975.00 \$975.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$19,875.00 pages you have attached for Part 2. Write that number here...... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... \$1.500.00 Household Furniture 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices

including cell phones, cameras, media players, games

☐ No

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Debtor 1	Joseph D. Cerasan	i	Document	Case number	(if known)	
■ Yes.	Describe					
		aptop Comp Player, Stere		me Console, Video Games,	]	\$1,000.00
Exampl ■ No	other collections, mei			oks, pictures, or other art objects; sta	amp, coin,	or baseball card collections;
	Describe					
Exampl  No	ent for sports and hobb es: Sports, photographic, musical instruments  Describe		other hobby equipment;	bicycles, pool tables, golf clubs, skis	; canoes a	and kayaks; carpentry tools;
□ No	ns  bles: Pistols, rifles, shotgu  Describe	ıns, ammunitic	on, and related equipmen	t		
		hann Chatan	Owers Heredown		1	\$500.00
	Moss	berg Snotgi	un, 9mm Handgun			\$500.00
□ No	oles: Everyday clothes, fu	rs, leather coa	ats, designer wear, shoes	, accessories		
	Used	Clothing			]	\$200.00
□ No		ostume jewelry	v, engagement rings, wed	ding rings, heirloom jewelry, watches	s, gems, g	jold, silver
	Wedo	ling Ring			]	\$100.00
Examµ □ No	rm animals  bles: Dogs, cats, birds, ho  Describe	orses				
	2 Dog	js			]	\$0.00
■ No	her personal and house		ou did not already list, i	ncluding any health aids you did r	not list	
	the dollar value of all of art 3. Write that number			ny entries for pages you have atta	ched	\$3,300.00
Part 4: De	scribe Your Financial Asse	ts				
Do you ov	vn or have any legal or o	equitable inte	erest in any of the follow	ring?		Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 3

Case 18-80368 Doc 1 Filed 02/26/18 Entered 02/26/18 16:50:38 Desc Main Document Page 13 of 53 Case number (if known) Debtor 1 Joseph D. Cerasani 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... Stillman Bank \$0.00 Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans Yes. List each account separately. Type of account: Institution name: **Pension** Union Unknown 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No

☐ Yes. Give specific information about them...

Dahtan 4	Land B. Connect	Document	Page 14 of 53		
Debtor 1	Joseph D. Cerasani			ase number (if known)	
Exam ■ No	ses, franchises, and other generaples: Building permits, exclusive lie.  Give specific information about the second secon	censes, cooperative association	on holdings, liquor license	es, professional licens	es
Money or	property owed to you?				Current value of the portion you own?  Do not deduct secured claims or exemptions.
☐ No	funds owed to you				
■ Yes.	. Give specific information about th	em, including whether you alro	eady filed the returns and	the tax years	
		2017 Tax Refund		State	\$127.50
■ No	y support uples: Past due or lump sum alimor . Give specific information	ny, spousal support, child supp	oort, maintenance, divorce	e settlement, property	settlement
Exam	amounts someone owes you oples: Unpaid wages, disability insubenefits; unpaid loans you muture. Give specific information		nefits, sick pay, vacation	pay, workers' compe	nsation, Social Security
Exam	sts in insurance policies oples: Health, disability, or life insur	ance; health savings account	(HSA); credit, homeowne	er's, or renter's insura	nce
■ No □ Yes.	. Name the insurance company of Company r		Beneficiary	:	Surrender or refund value:
If you somed ■ No	are the beneficiary of a living trust one has died.  Give specific information			urrently entitled to rec	eive property because
Exam ■ No	s against third parties, whether opples: Accidents, employment dispose.  Describe each claim			or payment	
■ No	contingent and unliquidated cla	ims of every nature, includi	ng counterclaims of the	debtor and rights to	o set off claims
■ No	nancial assets you did not alrea	dy list			
	the dollar value of all of your en Part 4. Write that number here				\$127.50

Official Form 106A/B Schedule A/B: Property page 5

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Debt		Case 18-80368 oseph D. Cerasani	Doc 1	Filed 02/26/18 Document	Entered 02 Page 15 of	2/26/18 16:50:38 53 Case number (if known)	Desc Main
		•				case named (" mom)	
	o you own No. Go to P		itable interest	in any business-related p	roperty?		
Ц	Yes. Go to	line 38.					
Part (	6: Describ	be Any Farm- and Common or have an interest in fa	ercial Fishing- armland, list it ir	Related Property You Own Part 1.	n or Have an Interes	st In.	
46. <b>C</b>	o you ow	n or have any legal o	r equitable ir	nterest in any farm- or	commercial fishir	ng-related property?	
I	No. Go t	o Part 7.					
	☐ Yes. Go	to line 47.					
Part 1	7: De	escribe All Property You	Own or Have a	an Interest in That You Did	d Not List Above		
	Examples: No	ve other property of a Season tickets, countressessing information	y club membe				
54.	Add the d	dollar value of all of yo	our entries fr	om Part 7. Write that n	umber here		\$0.00
Part 8	8: List	the Totals of Each Part	of this Form				
55.	Part 1: To	otal real estate. line 2					\$142,641.0
		otal vehicles, line 5			\$19,875.00		<u> </u>
57.	Part 3: To	otal personal and hou	sehold items	s, line 15	\$3,300.00		
58.	Part 4: To	otal financial assets, l	ine 36	_	\$127.50		
59.	Part 5: To	otal business-related	property, line	e 45	\$0.00		
60.	Part 6: To	otal farm- and fishing-	related prop	erty, line 52	\$0.00		
61.	Part 7: To	otal other property no	t listed, line	54 +	\$0.00		
62.	Total pers	sonal property. Add lir	nes 56 throug	h 61	\$23,302.50	Copy personal property t	otal <b>\$23,302.5</b>

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$165,943.50

		DOMINIC	H 1 MW: 10 M 00	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Joseph D. Cerasa	ani		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is an
				amended filing

## Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the Pro	perty You	Claim as	Exempt
---------	----------	---------	-----------	----------	--------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
Copy the value from Check only one box for each exemption. Schedule A/B				
\$142,641.00	<b>\$15,000.0</b>		735 ILCS 5/12-901	
		100% of fair market value, up to any applicable statutory limit		
\$1,400.00		\$2,400.00	735 ILCS 5/12-1001(c)	
		100% of fair market value, up to any applicable statutory limit		
\$975.00		\$975.00	735 ILCS 5/12-1001(b)	
		100% of fair market value, up to any applicable statutory limit		
\$1,500.00		\$1,500.00	735 ILCS 5/12-1001(b)	
		100% of fair market value, up to any applicable statutory limit		
\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)	
		100% of fair market value, up to any applicable statutory limit		
	\$1,400.00 \$1,500.00	\$1,400.00  \$1,000.00	\$1,400.00  \$1,500.00  \$1,500.00  \$1,500.00  \$1,500.00  \$1,000.00  \$2,400.00  \$2,400.00  \$3,400.00  \$4,400.00  \$1,00% of fair market value, up to any applicable statutory limit  \$1,000.00  \$1,00% of fair market value, up to any applicable statutory limit  \$1,000.00  \$1,00% of fair market value, up to any applicable statutory limit	

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Debtor 1 Joseph D. Cerasani Case number (if known)

				` ,		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	Mossberg Shotgun, 9mm Handgun Line from <i>Schedule A/B</i> : <b>10.1</b>	\$500.00		\$397.50	735 ILCS 5/12-1001(b)	
				100% of fair market value, up to any applicable statutory limit		
	Used Clothing Line from Schedule A/B: 11.1	\$200.00		\$200.00	735 ILCS 5/12-1001(a)	
	Line IIIII Schedule PAB. 11.1			100% of fair market value, up to any applicable statutory limit		
	Wedding Ring Line from Schedule A/B: 12.1	\$100.00		\$100.00	735 ILCS 5/12-1001(a)	
	Line Iron Schedule AVD. 12.1			100% of fair market value, up to any applicable statutory limit		
	Pension: Union Line from Schedule A/B: 21.1	Unknown		100%	735 ILCS 5/12-1006	
	Line Iron Schedule AVD. 2111			100% of fair market value, up to any applicable statutory limit		
	State: 2017 Tax Refund Line from Schedule A/B: 28.1	\$127.50		\$127.50	735 ILCS 5/12-1001(b)	
L	Ellie Holli Genedale PVB. 20.1			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every  ■ No  □ Yes. Did you acquire the property cover	3 years after that for ca	ases fi	·	,	
	□ No	od by the exemption w		,2 to days boloto you mod tills odse	•	

Yes

		Document Pa	aae 18 a	of 53		
Fill in this informati	ion to identify yοι	ur case:				
Debtor 1	Joseph D. Cera	sani				
_	First Name		t Name			
Debtor 2						
_	First Name	Middle Name Last	t Name			
United States Bankri	untou Court for the	: NORTHERN DISTRICT OF ILLINOI	10			
United States Bankro	upicy Court for the	. NORTHERN DISTRICT OF ILLINOI	<u> </u>			
Case number						
(if known)					☐ Check	if this is an
					ameno	led filing
Official Form 1	<u>106D</u>					
Schedule D	: Creditors	Who Have Claims See	cured	by Propert	V	12/15
		If two married people are filing together, bo out, number the entries, and attach it to this				
. Do any creditors hav	ve claims secured h	v vour property?				
_ `				h a a a a a b i a a a la a a		
No. Check thi	is box and submit t	his form to the court with your other sche	aules. You	nave nothing else t	o report on this form.	
Yes. Fill in all	of the information	below.				
Part 1: List All S	ecured Claims					
2. List all secured clai	ims. If a creditor has	more than one secured claim, list the creditor s	separately	Column A	Column B	Column C
for each claim. If more	than one creditor has	s a particular claim, list the other creditors in Pa		Amount of claim	Value of collateral	Unsecured
much as possible, list the	ne claims in alphabeti	cal order according to the creditor's name.		Do not deduct the value of collateral. \$22,895.00	that supports this claim \$17,500.00	portion If any \$5,395.00
2.1 Chase Auto		Describe the property that secures the claim:				
Creditor's Name		2009 Dodge Challenger 56,000 n		<del></del>		
P.o. Box 901	003	As of the date you file, the claim is: Check apply.	all that			
Fort Worth,	TX 76101	Contingent				
Number, Street, City	y, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortg	age or secure	ed		
Debtor 2 only		car loan)				
☐ Debtor 1 and Debto	r 2 only	☐ Statutory lien (such as tax lien, mechanic	c's lien)			
☐ At least one of the d	lebtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim	relates to a	Other (including a right to offset)				
community debt						
	Opened					
	04/16 Last					
	Active					
Date debt was incurre	ed 1/05/18	Last 4 digits of account number	3603			
	<u> </u>					
2.2 Village Capit	tal/dovnem	Describe the property that secures the cl	aim:	\$138,141.00	\$142,641.00	\$0.00
Creditor's Name		802 Seven Hickory Road Byron,	IL	<u> </u>		-
		61010 Ogle County				
		As of the date you file, the claim is: Check	all that			
1 Corporate		apply.	all that			
Lake Zurich,	IL 60047	Contingent				
Number, Street, City	y, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as mortg	age or secure	ed		
Debtor 2 only		car loan)				
☐ Debtor 1 and Debto	r 2 only	☐ Statutory lien (such as tax lien, mechanic	c's lien)			

 $\square$  Judgment lien from a lawsuit

 $\hfill \square$  At least one of the debtors and another

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Debtor 1 Joseph D.	. Cerasani		(	Case number (if know)	
First Name	Middle Na	me Last Name			
☐ Check if this claim re	elates to a	Other (including a right to offset)			
Date debt was incurred	Opened 11/16 Last Active 1/25/18	Last 4 digits of account number	1385		
	•	olumn A on this page. Write that number the dollar value totals from all pages.	here:	\$161,036.00	
Write that number her	e:			\$161,036.00	

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Case 10 00000 E	Document	Page 20	) of 53	7.00 BC301	VICIII
Fill in this	information to identify your o		T UM. Z	7 (7) (7)		
Debtor 1	Joseph D. Cerasa	ni				
DCDIOI 1	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing	ng) First Name	Middle Name	Last Name			
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS			
Case num	her					
(if known)					☐ Chec	k if this is an
					amen	nded filing
Official	Corres 400E/E					
	Form 106E/F	ha Haya Unaasurad	Claima			10/15
		ho Have Unsecured Part 1 for creditors with PRIORIT				12/15
Schedule D: eft. Attach t name and ca	Creditors Who Have Claims Secu the Continuation Page to this page ase number (if known).	red Leases (Official Form 106G). Dured by Property. If more space is a set. If you have no information to re	needed, copy t	he Part you need, fill it out,	number the entries	in the boxes on the
	List All of Your PRIORITY Un					
_ ′	creditors have priority unsecured	d claims against you?				
	Go to Part 2.					
☐ Yes						
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims				
3. Do any	creditors have nonpriority unsec	ured claims against you?				
☐ No.	You have nothing to report in this pa	art. Submit this form to the court with	your other sche	dules.		
■ Yes						
unsecu	red claim, list the creditor separately	nims in the alphabetical order of the for each claim. For each claim listed st the other creditors in Part 3.If you have the other creditors.	, identify what t	ype of claim it is. Do not list c	laims already include	d in Part 1. If more
					То	tal claim
4.1 <b>C</b> a	avalry Portfolio Serv	Last 4 digits of acc	ount number	7105		\$1,192.00
No	npriority Creditor's Name					·
	o Box 27288 empe, AZ 85285	When was the debt	incurred?	Opened 02/17		
	imber Street City State Zlp Code	As of the date you	file, the claim i	s: Check all that apply		
WI	no incurred the debt? Check one.	·	•			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and ano	ther Type of NONPRIOR	ITY unsecured	l claim:		
	Check if this claim is for a comn	nunity				
de	bt	☐ Obligations arisin		ration agreement or divorce t	hat you did not	
	the claim subject to offset?	report as priority clai		g plans, and other similar deb	ate	
	No	<u>_</u>	•	•		
Ш	Yes	Other. Specify	Collection /	Attorney Synchrony E	sank	

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Case number (if know)

4.2	Constance Augsburger	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name 516 Fourth Avenue P.O. Box 358 Rochelle, IL 61068	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Fees	
4.3	Contract Callers Inc	Last 4 digits of account number 3642	\$441.00
	Nonpriority Creditor's Name Contract Callers Inc. Cci	When was the debt incurred? Opened 08/14	
	Augusta, GA 30901	Opened 00/14	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Company  Collection Attorney Commonwealth Edison Company	
4.4	Dept Of Education/neln	Last 4 digits of account number 7874	\$24,762.00
	Nonpriority Creditor's Name	Opened 07/45 Lost Active	
	121 S 13th St	Opened 07/15 Last Active When was the debt incurred? 5/18/16	
	Lincoln, NE 68508		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_	☐ Contingent	
	■ Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	☐ Other. Specify	
		Educational	

Document Page 22 of 53 Debtor 1 Joseph D. Cerasani Case number (if know) 4.5 Dept Of Education/neln Last 4 digits of account number 7175 \$19,646.00 Nonpriority Creditor's Name Opened 04/16 Last Active 121 S 13th St When was the debt incurred? 12/14/17 Lincoln, NE 68508 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify **Educational** 4.6 **Dept Of Education/neln** Last 4 digits of account number 9975 \$6,921.00 Nonpriority Creditor's Name Opened 01/17 Last Active 121 S 13th St When was the debt incurred? 11/17/17 Lincoln, NE 68508 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.7 **Folk Law LLC** Last 4 digits of account number 0307 \$1,415.00 Nonpriority Creditor's Name **PO BOX 375** When was the debt incurred? 02/12/2018 Oregon, IL 61061 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim:

Official Form 106 E/F

debt

■ No

☐ Yes

☐ Student loans

report as priority claims

■ Other. Specify Debt Owed

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

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Case number (if know)

Debio	Joseph D. Cerasani		
4.8	GC Services Limited Partnership	Last 4 digits of account number 4878	\$433.00
	Nonpriority Creditor's Name Dept. HOVS 051 PO Box 3044	When was the debt incurred? 06/2017	
	Livonia, MI 48151-3044  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you report as priority claims	ı did not
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Debt Owed	
4.9	H&R Accounts Nonpriority Creditor's Name	Last 4 digits of account number 5540	\$214.87
	Attn: Bankruptcy Dept. PO Box 672	When was the debt incurred? 01/2017	
	Moline, IL 61266-0672  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam is. Oneok an that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you report as priority claims	ı did not
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Debt Owed	
4.1	Health Alliance	Last 4 digits of account number 3237	\$214.87
	Nonpriority Creditor's Name 301 S. Vine Street Urbana, IL 61801	When was the debt incurred? 01/2017	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	<ul><li>☐ Student loans</li><li>☐ Obligations arising out of a separation agreement or divorce that you</li></ul>	u did not
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Debt	

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Metlife Auto & Home	Last 4 digits of account number	7408	\$24
Nonpriority Creditor's Name PO BOX 41753 Philadelphia, PA 19101	When was the debt incurred?	07/2015	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharir	g plans, and other similar debts	
☐ Yes	Other. Specify Debt Owed		
Sears/CBNA	Last 4 digits of account number	4878	\$2,55
Nonpriority Creditor's Name	- Mileon was the debt incomed?	01/2013	
Attn: Bankruptcy Dept. PO Box 6189	When was the debt incurred?	01/2013	
Sioux Falls, SD 57117			
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharir	g plans, and other similar debts	
☐ Yes	Other. Specify Credit Card	•	
State Collection Servi	Last 4 digits of account number	6999	\$14
Nonpriority Creditor's Name 2509 S Stoughton Rd	When was the debt incurred?	Opened 06/17	
Madison, WI 53716			
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Пол		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	Student loans	. J.	
☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	nation agreement of divolce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Collection	Attorney Swedishamerican A	
Yes	Other. Specify Divison Of		

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Joseph D. Cerasani		Case number (if know)	
Stillman Bank	Last 4 digits of account number	4870	\$690.8
Nonpriority Creditor's Name 101 East Main Street PO Box 150	When was the debt incurred?	01/2017	
Stillman Valley, IL 61084  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt s the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	uration agreement or divorce that you did not	
No	Debts to pension or profit-sharir	a plans, and other similar debts	
⊒ No □ Yes	Other. Specify Debt Owed		
Swedish American Medical Group	Last 4 digits of account number	4787	\$1,528.0
Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 1567	When was the debt incurred?	02/2018	·
Rockford, IL 61110  lumber Street City State Zlp Code  Vho incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
lebt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharir	g plans, and other similar debts	
☐ Yes	Other Specify Medical De		
SwedishAmerican Hospital	Last 4 digits of account number	2186	\$1,931.8
lonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 310283	When was the debt incurred?	10/21/2016	
Des Moines, IA 50331  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community		ration agreement or divorce that you did not	
ls the claim subject to offset? ■	report as priority claims  Debts to pension or profit-sharir	a plane, and other similar debts	
■ No			
☐ Yes	Other. Specify Medical De	Dt	

Official Form 106 E/F

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4.1 7	SYNCB/Care Credit	Last 4 digits of account numbe	<sub>r</sub> 2813	\$1,230.03
<u>,                                     </u>	Nonpriority Creditor's Name Attn: Bankruptcy Dept PO BOX 960061	When was the debt incurred?	01/2017	-
	Orlando, FL 32896  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the clair	n is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecui	red claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a se report as priority claims	paration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sha	ring plans, and other similar debts	
	Yes	Other. Specify Credit Ca	rd Purchases	-
Part 3:	List Others to Be Notified About a Do	ebt That You Already Listed		
is tryi have	nis page only if you have others to be notified ing to collect from you for a debt you owe to s more than one creditor for any of the debts th ed for any debts in Parts 1 or 2, do not fill out	omeone else, list the original creditor at you listed in Parts 1 or 2, list the ad	in Parts 1 or 2, then list the collection agenc	y here. Similarly, if you
	and Address	On which entry in Part 1 or Part 2 did yo		
	tic Credit & Finance Inc.		Part 1: Creditors with Priority Unsecured Cla	
_	en, MI 48090		Part 2: Creditors with Nonpriority Unsecured	Claims
		Last 4 digits of account number	5926	
	and Address	On which entry in Part 1 or Part 2 did yo		
	& Gaines PC Henn Ave	Line <b>4.17</b> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Cla	
	ling, IL 60090		Part 2: Creditors with Nonpriority Unsecured	Claims
	<b>5</b> ,	Last 4 digits of account number	3343	
	and Address	On which entry in Part 1 or Part 2 did yo		
	Services E. Touhy Ave.		Part 1: Creditors with Priority Unsecured Cla	
Suite			Part 2: Creditors with Nonpriority Unsecured	Claims
Des P	Plaines, IL 60018	Last 4 digits of account number	2768	
NI	and Address	On which costs in Dord 4 on Dord 0 did on		
	and Address is Brebner & Associates	On which entry in Part 1 or Part 2 did you Line <b>4.16</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Cla	ims
	Bankruptcy Dept. orthpoint Blvd		■ Part 2: Creditors with Nonpriority Unsecured	
Wauk	egan, IL 60085	Last 4 digits of account number	0602	
	and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?	
	is Brebner & Associates		☐ Part 1: Creditors with Priority Unsecured Cla	
860 N	Bankruptcy Dept. orthpoint Blvd egan, IL 60085		■ Part 2: Creditors with Nonpriority Unsecured	Claims
vvaun	egan, ic 00003	Last 4 digits of account number		
	nd Address nd Funding, LLC	On which entry in Part 1 or Part 2 did you Line <b>4.12</b> of ( <i>Check one</i> ):	ou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Cla	ims
	Bankruptcy Dept.		Part 2: Creditors with Nonpriority Unsecured	
	Northside Drive, Suite 300		2. Statistic Hanghamy andounce	
san D	Diego, CA 92108	Last 4 digits of account number	4878	

Part 4: Add the Amounts for Each Type of Unsecured Claim

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Debtor 1 Joseph D. Cerasani

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
T. (.)	6f.	Student loans	6f.	\$ 51,329.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 12,236.28
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 63,565.28

Fill in this infor	rmation to identify your	case:		
Debtor 1	Joseph D. Cerasa	ani		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

# Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				<del></del>
	Number	Street			_
	City		State	ZIP Code	_
2.2					<u> </u>
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.4					
	Name				<del></del>
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				<del></del>
	Number	Street			<u> </u>
	City		State	ZIP Code	_

		Docume	ent Page 29 d	of 53
Fill in this	information to identify you	r case:		
Debtor 1	Joseph D. Ceras	eani		
Dobtor 1	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filin	ng) First Name	Middle Name	Last Name	
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case numb	her			
(if known)				☐ Check if this is an
				amended filing
Sched Codebtors Deople are	filing together, both are eq	are also liable for any deb ually responsible for supp	olying correct information	as complete and accurate as possible. If two married tion. If more space is needed, copy the Additional Page, to this page. On the top of any Additional Pages, write
	and case number (if knowr			this page. On the top of any Additional Lages, while
1. Do y	you have any codebtors? (I	f you are filing a joint case,	do not list either spouse	e as a codebtor.
■ No				
☐ Yes	<b>;</b>			
Arizon	a, California, Idaho, Louisiana Go to line 3. . Did your spouse, former spo	a, Nevada, New Mexico, Pu	erto Rico, Texas, Wash	ry? (Community property states and territories include ington, and Wisconsin.)
in line Form	2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 06G). Use Schedule D, Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and 3	ZIP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				Cabadula D. lina
	Name			
				☐ Schedule G, line
_				
	Number Street City	State	ZIP Code	
3.2				☐ Schedule D, line
	Name			Schedule E/F, line
				☐ Schedule G, line
=	N 1			
	Number Street City	State	ZIP Code	
	•			

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Sill	in this information to identify your c	aco.					
	btor 1 Joseph D. (						
	btor 2 puse, if filing)			_			
Uni	ited States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS				
	se number		-		k if this is: In amended	d filing	
	·			D A	suppleme	nt showing postpet as of the following o	
<u>O</u>	fficial Form 106I			Ī	1M / DD/ Y`	YYY	
S	chedule I: Your Inc	ome					12/15
atta	use. If you are separated and you che a separate sheet to this form.  The describe Employment						
1.	Fill in your employment information.		Debtor 1		Debtor 2	or non-filing spor	use
	If you have more than one job,	Employment status	■ Employed		☐ Emplo	yed	
	attach a separate page with information about additional	Employment status	☐ Not employed		■ Not en	nployed	
	employers.	Occupation	Set-up Welder				
	Include part-time, seasonal, or self-employed work.	Employer's name	Eclipse Inc.				
	Occupation may include student or homemaker, if it applies.	Employer's address	1665 Elmwood Road Rockford, IL 61103				
		How long employed t	here? 1 year				
Pai	rt 2: Give Details About Mo	nthly Income					
	imate monthly income as of the duse unless you are separated.	late you file this form. If	you have nothing to report for	any line, write	\$0 in the	space. Include you	r non-filing
	ou or your non-filing spouse have m e space, attach a separate sheet to		ombine the information for all $\epsilon$	employers for	that persor	n on the lines below	v. If you need
				For Del	otor 1	For Debtor 2 or non-filing spou	se
2.	List monthly gross wages, sala deductions). If not paid monthly,			\$3	,636.43	\$0	.00

+\$

0.00

3,636.43

0.00

0.00

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

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Debt	or 1	Joseph D. Cerasani	-	Case r	number ( <i>if known</i> )			_
				For	Debtor 1		btor 2 or ing spouse	
	Cor	py line 4 here	4.	\$	3,636.43	\$	0.00	
5.	l ist	t all payroll deductions:						
0.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	543.55	\$	0.00	
	5b.	Mandatory contributions for retirement plans	5b.	<b>\$</b> —	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	692.25	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify:	5h.+	\$		+ \$	0.00	
6.	Add	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,235.80	\$	0.00	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,400.63	\$	0.00	
8.	List 8a.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	660.83	\$	0.00	
	8d. 8e.	Unemployment compensation Social Security	8d. 8e.	\$ \$	0.00	\$	0.00 0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:		\$	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	0.00	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	660.83	\$	0.00	
10.		culate monthly income. Add line 7 + line 9. If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	3	3,061.46 + \$_	C	0.00 = \$ 3,061.4	6
11.	Inclu othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not ecify:	depend	,	•	•	edule J. 11. +\$ 0.0	0
12.		d the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the Summary of Schedules and Statistical Summary of Certallies					12. \$ <b>3,061.4</b>	6
							Combined	
13.	Do :	you expect an increase or decrease within the year after you file this form No.	1?				monthly income	
		Yes. Explain: Debtor's spouse is seeking social security disab	ility.					

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Fill i	n this informa	tion to identify yo	onic case.			1		
						Ch.	and if this is	
Debt	IOI I	Joseph D. C	erasanı				eck if this is: An amended filin	ng
Debt								nowing postpetition chapter
` '	ouse, if filing)						13 expenses as	of the following date:
Unite	ed States Bankr	ruptcy Court for the	: NORTH	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	,
	e number nown)							
Of	ficial Fo	rm 106J				-		
Sc	chedule	J: Your	Exper	ises				12/1
Be a	as complete a	and accurate as	possible eded, atta	. If two married people ar ich another sheet to this				
Part	1: Descr	ibe Your House	hold					
1.	Is this a joir	nt case?						
	No. Go to		_					
			ın a separ	ate household?				
			st file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of De	ebtor 2.	
2.		e dependents?	_					
۷.	Do not list Do	•	□ No	Fill out this information for	Dependent's relat	ionchin to	Dependent's	Does dependent
	Debtor 2.	ebioi i and	Yes.	each dependent	Debtor 1 or Debto		age	live with you?
	Do not state	the						□ No
	dependents	names.			Daughter		15	■ Yes
								□ No
								_ Yes
								□ No □ Yes
								_ □ res □ No
								☐ Yes
3.	Do your exp	enses include		No				_ = 100
		f people other t d your depende	han $_{\square}$	Yes				
	yourself and	a your aepenae	nts? —	. 55				
Esti exp	mate your ex		our bankr	uptcy filing date unless y				hapter 13 case to report o of the form and fill in the
the		n assistance an		government assistance i cluded it on <i>Schedule I:</i> \			Your ex	<b>cpenses</b>
		_						
4.		or home owners and any rent for th		ses for your residence. I or lot.	nclude first mortgag	Je 4.	\$	982.49
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
	•	rty, homeowner's				4b.		0.00
				upkeep expenses		4c.	·	75.00
5.		owner's associat		dominium dues <b>our residence,</b> such as ho	ime equity loops	4d. 5.	·	0.00 0.00
J.		igage payiil	IUI Y	rai rooiaonoo, suun as 110	THE EQUILY TOURS	J.	Ψ	U.UU

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Debtor 1 Joseph D. Cerasani		Case num	ber (if known)	
6. Utilities:				
6a. Electricity, heat, natural gas		6a.	\$	224.00
6b. Water, sewer, garbage collection		6b.	·	68.00
6c. Telephone, cell phone, Internet, sate	allite, and cable services	6c.	·	359.00
6d. Other. Specify:	sinte, and cable services	6d.	·	
Food and housekeeping supplies		ou. 7.	· ·	0.00
	<b>1</b> 0		·	400.00
Childcare and children's education cost	is	8.	·	0.00
Clothing, laundry, and dry cleaning		9.	\$	50.00
Personal care products and services		10.		50.00
. Medical and dental expenses		11.	\$	0.00
<ul> <li>Transportation. Include gas, maintenance Do not include car payments.</li> </ul>	e, bus or train fare.	12.	\$	75.00
<ul> <li>Entertainment, clubs, recreation, newsp</li> </ul>	naners magazines and hooks	13.	·	0.00
. Charitable contributions and religious d		14.	· -	0.00
•	ionations	14.	<b>Ф</b>	0.00
<ul> <li>Insurance.</li> <li>Do not include insurance deducted from your</li> </ul>	our pay or included in lines 4 or 20			
15a. Life insurance	our pay or included in lines 4 or 20.	15a.	¢	0.00
15b. Health insurance		15a. 15b.	· ·	
			·	0.00
15c. Vehicle insurance		15c.	·	190.00
15d. Other insurance. Specify:		15d.	\$	0.00
. Taxes. Do not include taxes deducted from	n your pay or included in lines 4 or 20.	40	Φ.	
Specify:		16.	\$	0.00
. Installment or lease payments: 17a. Car payments for Vehicle 1		17a.	<b>c</b>	EC7.00
. ,			·	567.00
17b. Car payments for Vehicle 2		17b.	· ·	0.00
17c. Other. Specify:		17c.	· -	0.00
17d. Other. Specify:		17d.	\$	0.00
Your payments of alimony, maintenance		18.	\$	0.00
deducted from your pay on line 5, Scheo  Other payments you make to support of		10.	\$	0.00
Specify:	illers who do not live with you.	19.	Ψ	0.00
Other real property expenses not includ	led in lines 4 or 5 of this form or on Scho		our Incomo	
20a. Mortgages on other property	led in lines 4 of 5 of this form of on sche	20a.		0.00
20b. Real estate taxes		20a. 20b.	·	
	20112020		·	0.00
20c. Property, homeowner's, or renter's in		20c.		0.00
20d. Maintenance, repair, and upkeep ex	•	20d.		0.00
20e. Homeowner's association or condon	ninium dues	20e.	· .	0.00
. Other: Specify:		21.	+\$	0.00
. Calculate your monthly expenses				
22a. Add lines 4 through 21.			\$	3,040.49
22b. Copy line 22 (monthly expenses for D	ebtor 2) if any from Official Form 106 l-2		\$	5,070.73
			·	0.040.40
22c. Add line 22a and 22b. The result is yo	our montnly expenses.		\$	3,040.49
. Calculate your monthly net income.				
23a. Copy line 12 (your combined month)	ly income) from Schedule I.	23a.	\$	3,061.46
23b. Copy your monthly expenses from li		23b.	·	3,040.49
200. Copy your monthly expenses from in	220 0000.	200.		3,040.43
23c. Subtract your monthly expenses from	m vour monthly income			
The result is your <i>monthly net incom</i>		23c.	\$	20.97
,				
4. Do you expect an increase or decrease	in your expenses within the year after yo	u file this	s form?	
For example, do you expect to finish paying for y	our car loan within the year or do you expect your			or decrease because of
modification to the terms of your mortgage?				
■ No.				
□ Voc Evolain here:				

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Fill in th	his information to identify y	our case:			
Debtor 1	Joseph D. Ce	rasani			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if,	, filing) First Name	Middle Name	Last Name		
United S	States Bankruptcy Court for the	ne: NORTHERN DISTRIC	T OF ILLINOIS		
Case nu	ımhor				
(if known)					☐ Check if this is an
				'	amended filing
Officia	al Form 106Dec				
Dec	laration Abou	t an Individua	l Debtor's Sc	hedules	12/15
					12,10
If two ma	arried people are filing toge	ether, both are equally respo	onsible for supplying corr	ect information.	
		ou file bankruptcy schedule ud in connection with a ban			
years, o	r both. 18 U.S.C. §§ 152, 13	41, 1519, and 3571.	iki upicy case can result ii	i illies up to \$250,000, or ill	iprisoninent for up to 20
	Sign Below				
Dio	d you pay or agree to pay s	omeone who is NOT an atto	orney to help you fill out be	ankruptcy forms?	
_	No				
-	No				
	Yes. Name of person				Petition Preparer's Notice,
				Declaration, and Si	ignature (Official Form 119)
		lare that I have read the sur	nmary and schedules filed	I with this declaration and	
that	t they are true and correct.				
Х	/s/ Joseph D. Cerasani		Χ		
	Joseph D. Cerasani		Signature of I	Debtor 2	
	Signature of Debtor 1				
	Doto Fohmer 20 0044	0	Doto		
	Date <b>February 26, 2018</b>	<u> </u>	Date		

	in this inform	ation to identify you	. 00001				
		ation to identify you					
De	btor 1	Joseph D. Ceras First Name	Middle Name		Last Name		
	btor 2 buse if, filing)	First Name	Middle Name		Last Name		
Uni	ited States Ban	kruptcy Court for the:	NORTHERN DIS	STRICT OF IL	LINOIS		
		, ,					
	se number						Check if this is an mended filing
	ficial For						
St	atement	of Financial A	Affairs for li	ndividua	ils Filing for B	ankruptcy	4/16
info nun	rmation. If monber (if known		attach a separate stion.	sheet to this	form. On the top of any	equally responsible for sup y additional pages, write you	
1.	What is your	current marital statu	s?				
	<ul><li>■ Married</li><li>□ Not marr</li></ul>	ied					
2.	During the la	st 3 years, have you	lived anywhere oth	er than wher	e you live now?		
	■ No □ Yes. List	all of the places you li	ved in the last 3 yea	ars. Do not inc	lude where you live now	ı.	
	Debtor 1 Pri	or Address:	Dates I lived th	Debtor 1 ere	Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there
<b>3.</b> stat						ity property state or territor ico, Texas, Washington and V	
	■ No □ Yes. Mal	ke sure you fill out <i>Sch</i>	nedule H: Your Code	ebtors (Official	Form 106H).		
Pai	rt 2 Explain	the Sources of You	r Income				
4.	Fill in the total	amount of income yo	u received from all jo	obs and all bu	ousiness during this you sinesses, including parte ether, list it only once ur		ndar years?
	□ No						
	Yes. Fill	in the details.					
			Debtor 1			Debtor 2	
			Sources of income Check all that apple	y. (b	ross income efore deductions and cclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commis bonuses, tips	ssions,	\$6,792.45	☐ Wages, commissions, bonuses, tips	
			☐ Operating a bus	siness		☐ Operating a business	

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Page 36 of 53 Case number (if known) Debtor 1 **Joseph D. Cerasani** 

				Debtor 1					Debtor 2		
				Sources of in Check all that		(befo	ss income ore deductions a usions)	ind	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	r last calen anuary 1 to	dar year: December 3	1, 2017 )	■ Wages, co	ommissions,		\$43,636.	.97	☐ Wages, combonuses, tips	missions,	
				☐ Operating	a business				☐ Operating a	business	
		dar year befo December 3		■ Wages, co	mmissions,		\$70,000.	.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating	a business				☐ Operating a	business	
5.	Include include and other winnings.  List each s	come regardle public benefit If you are filin	ess of wheth t payments; ig a joint cas e gross inco	ner that income pensions; renta se and you have	is taxable. Exa Il income; inter e income that y	amples rest; div you rece	idends; money o eived together, lis	are ali collecte st it on		royalties; an ebtor 1.	ecurity, unemployment d gambling and lottery
				Debtor 1					Debtor 2		
				Sources of ir Describe belo		each (befo	ss income from n source ore deductions a usions)		Sources of inc Describe below		Gross income (before deductions and exclusions)
		/ 1 of curren		Child Suppo	ort		\$1,321.	.66			
	r last calen anuary 1 to	dar year: December 3	1, 2017 )	Child Suppo	ort		\$12,636.	.00			
		dar year befo December 3		Child Suppo	ort		\$12,636.	.00			
Pa	rt 3: List	Certain Pay	ments You	Made Before `	ou Filed for	Bankru	intev				
6.		r Debtor 1's o	or Debtor 2 btor 1 nor D	's debts prima	rily consume	r debts umer de	? ebts. Consumer	debts	are defined in 11	U.S.C. § 10	1(8) as "incurred by an
		During the 9	00 days befo	•	bankruptcy, di	id you p	ay any creditor a	a total	of \$6,425* or mo	re?	
		☐ Yes	List below e	each creditor to							ne total amount you nd alimony. Also, do
		* Subject to		payments to ar t on 4/01/19 and				ed on o	r after the date o	f adjustment	
	■ Yes.			or both have prore you filed for				a total	of \$600 or more?		
		□ No.	Go to line 7	<b>'</b> .							
		■ Yes	include pay		estic support o						t creditor. Do not nclude payments to ar
	Creditor'	s Name and	Address	Da	ites of payme	ent	Total amour		Amount you still owe	Was this p	payment for

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Debtor 1 **Joseph D. Cerasani** 

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Case number (if known)

	Creditor's Name and Address	Dates of payment	Total amount	Amount you	Was this payment for	
	Village Capital/Dovnem	12/2017 - 2/2018	paid \$2,947.47	still owe \$138,141.00	■ Mortgage	
	1 Corporate Drive		Ψ=,0	<b>V</b> 100,111100	☐ Car	
	Lake Zurich, IL 60047				☐ Credit Card	
					☐ Loan Repayment	
					☐ Suppliers or vendors	
					Other	
	Chase Auto Finance PO Box 901003	12/2017 - 2/2018	\$1,701.00	\$22,895.00	☐ Mortgage	
	Fort Worth, TX 76101				■ Car	
	Tort Worth, 1x 70101				☐ Credit Card	
					☐ Loan Repayment	
					☐ Suppliers or vendors	
					Other	
	<ul> <li>a business you operate as a sole proprietor. alimony.</li> <li>No</li> <li>Yes. List all payments to an insider.</li> </ul>	11 U.S.C. § 101. Include pa	lyments for domestic	support obligatior	s, such as child support and	
		<b>D</b>			5	
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment	
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name	
ari	4: Identify Legal Actions, Repossession	ons. and Foreclosures				
	Within 1 year before you filed for bankrup List all such matters, including personal injur- modifications, and contract disputes.	tcy, were you a party in ar				
	□ No					
	=*					
	Yes. Fill in the details.					
	Case title				_	
		Nature of the case	Court or agency		Status of the case	
	Case number Cavalry SPV I LLC v. Joe Cerasani	Nature of the case  Contract	Court or agency Ogle County C			
	Case number			ircuit Clerk	■ Pending	
	Case number Cavalry SPV I LLC v. Joe Cerasani		Ogle County C	ircuit Clerk Street #300	■ Pending □ On appeal	
	Case number Cavalry SPV I LLC v. Joe Cerasani		Ogle County C	ircuit Clerk Street #300	■ Pending	
	Case number Cavalry SPV I LLC v. Joe Cerasani	Contract	Ogle County C 106 South 5th Oregon, IL 610	ircuit Clerk Street #300 61	■ Pending □ On appeal □ Concluded	evied?
	Case number Cavalry SPV I LLC v. Joe Cerasani 2017 SC 454  Within 1 year before you filed for bankrup	Contract	Ogle County C 106 South 5th Oregon, IL 610	ircuit Clerk Street #300 61	■ Pending □ On appeal □ Concluded	evied?
	Case number Cavalry SPV I LLC v. Joe Cerasani 2017 SC 454  Within 1 year before you filed for bankrup Check all that apply and fill in the details belo	Contract	Ogle County C 106 South 5th Oregon, IL 610	ircuit Clerk Street #300 61	Pending On appeal Concluded  ched, attached, seized, or le	of the
	Case number Cavalry SPV I LLC v. Joe Cerasani 2017 SC 454  Within 1 year before you filed for bankrup Check all that apply and fill in the details belo  No. Go to line 11.  Yes. Fill in the information below.	Contract tcy, was any of your propo	Ogle County C 106 South 5th Oregon, IL 610 erty repossessed, f	ircuit Clerk Street #300 61 foreclosed, garnis	Pending On appeal Concluded  ched, attached, seized, or le	

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Page 38 of 53 Document Case number (if known) Debtor 1 Joseph D. Cerasani 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? Nο Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment

Person Who Made the Payment, if Not You Springer Law Firm 5301 East State Street, Suite 105 Rockford, IL 61107

Email or website address

\$850.00

\$850.00

made

2/22/2018

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Debtor 1 Joseph D. Cerasani

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and variansferred	alue of any prope	erty	Date payment or transfer was made	Amount of payment
	Access Credit Counseling 633 W 5th Street Suite 26001 Los Angeles, CA 90071 http:accesscounselinginc.org	\$8.95			2/22/2018	\$8.95
17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you	rs or to make payments			or transfer any prope	rty to anyone who
	No					
	Yes. Fill in the details.					
	Person Who Was Paid Address	Description and v	alue of any prope	erty	Date payment or transfer was made	Amount of payment
18	Within 2 years before you filed for bankrupto	ry did you sell trade (	or otherwise transf	for any nron	perty to anyone othe	r than property
	transferred in the ordinary course of your but Include both outright transfers and transfers mainclude gifts and transfers that you have already No	usiness or financial affa ide as security (such as	airs? the granting of a se			
	Person Who Received Transfer Address	Description and v			any property or received or debts change	Date transfer was made
	Person's relationship to you					
	Shawn Durkey Belvidere, IL 61008	AR-15 Semi-aut	tomatic	\$800.00		1/2018
	Wife's Relative					
	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-pro		ny property to a se	lf-settled tru	ust or similar device	of which you are a
	■ No □ Yes. Fill in the details.					
	Name of trust	Description and v	alue of the proper	rty transferr	ed	Date Transfer was made
Par	List of Certain Financial Accounts, Ins	truments, Safe Deposi	t Boxes, and Stora	age Units		
	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, assoc	r other financial accou	nts; certificates of			,
	■ No □ Yes. Fill in the details.					
		Land Authority	T		4	1 - 41 1
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	clo	te account was osed, sold, oved, or insferred	Last balance before closing or transfer

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Debtor 1 Joseph D. Cerasani

21.	Do you now have, or did you have within 1 year cash, or other valuables?	r before you filed for bankruptcy, an	y safe deposit box or other deposito	ry for securities,			
	■ No						
	Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
22.	Have you stored property in a storage unit or p	lace other than your home within 1 y	year before you filed for bankruptcy	?			
	■ No □ Yes. Fill in the details.						
		Who also has at had access	Describe the contents	De veu etill			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
Par	19: Identify Property You Hold or Control for	Someone Else					
23.	Do you hold or control any property that some for someone.	one else owns? Include any property	y you borrowed from, are storing for	, or hold in trust			
	■ No						
	Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value			
Par	t 10: Give Details About Environmental Inform	•					
For	the purpose of Part 10, the following definitions	apply:					
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, ground	<del>-</del> •				
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		w, whether you now own, operate, o	or utilize it or used			
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		waste, hazardous substance, toxic s	substance,			
Rep	ort all notices, releases, and proceedings that y		they occurred.				
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable ι	under or in violation of an environme	ental law?			
	■ No						
	Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any	release of hazardous material?					
	■ No						
	Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
		,					

Case 18-80368 Doc 1 Filed 02/26/18 Entered 02/26/18 16:50:38 Document Page 41 of 53 ase number (if known) Debtor 1 Joseph D. Cerasani 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper **Dates business existed** 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Joseph D. Cerasani Signature of Debtor 2 Joseph D. Cerasani Signature of Debtor 1 Date February 26, 2018 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

☐ Yes. Name of Person \_\_\_

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

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Fill in this infor	mation to identify your cas	e:		Ī
Debtor 1	Joseph D. Cerasani	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the: N	ORTHERN DIS	TRICT OF ILLINOIS	
Case number (if known)				☐ Check if this is an amended filing
Official Fo		for Indiv	viduals Filing Under Chapt	ter 7 12/15
	ividual filing under chapte e claims secured by your p		Il out this form if:	
you have least	sed personal property and is form with the court with ever is earlier, unless the c	the lease has n in 30 days after	ot expired. you file your bankruptcy petition or by the date e time for cause. You must also send copies to	
	eople are filing together in nd date the form.	a joint case, bo	oth are equally responsible for supplying correct	information. Both debtors must
Be as complete			s needed, attach a separate sheet to this form. O	n the top of any additional pages,
Part 1: List Y	our Creditors Who Have S	ecured Claims		
For any credit information be		I of Schedule D	9: Creditors Who Have Claims Secured by Prope	rty (Official Form 106D), fill in the
	editor and the property that	is collateral	What do you intend to do with the property th secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's (	Chase Auto		<ul><li>☐ Surrender the property.</li><li>☐ Retain the property and redeem it.</li></ul>	□ No
Description of		er 56,000	Retain the property and enter into a Reaffirmation Agreement.	Yes
property securing debt	miles :		☐ Retain the property and [explain]:	
Creditor's \	/illage Capital/dovnem		☐ Surrender the property. ☐ Retain the property and redeem it.	□ No

Part 2: List Your Unexpired Personal Property Leases

IL 61010 Ogle County

802 Seven Hickory Road Byron,

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

Describe your unexpired personal property leases

Will the lease be assumed?

Yes

Description of

securing debt:

property

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Debtor 1 Joseph D. Cerasani	Case number (if known)
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention about property that is subject to an unexpired lease.	any property of my estate that secures a debt and any personal
X /s/ Joseph D. Cerasani X	
Joseph D. Cerasani Signature of Debtor 1	Signature of Debtor 2
Date February 26, 2018 Date	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-80368 Doc 1 Filed 02/26/18 Entered 02/26/18 16:50:38 Desc Main Document Page 48 of 53

B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Northern District of Illinois

In re	Joseph D. Cerasani	, o - o - o - o - o - o - o - o - o - o	Case No	·.	
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMP	ENSATION OF ATTOI	RNEY FOR I	DEBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the f be rendered on behalf of the debtor(s) in contemplation	iling of the petition in bankruptcy,	or agreed to be pa	id to me, for services re	
	For legal services, I have agreed to accept		s	850.00	
	Prior to the filing of this statement I have received	ed	s	850.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed co	mpensation with any other person	unless they are me	mbers and associates o	f my law firm.
	☐ I have agreed to share the above-disclosed competopy of the agreement, together with a list of the				aw firm. A
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspect	s of the bankruptc	case, including:	
	<ul><li>a. Analysis of the debtor's financial situation, and rest.</li><li>b. Preparation and filing of any petition, schedules, sc.</li><li>c. Representation of the debtor at the meeting of cred.</li><li>d. [Other provisions as needed]</li></ul>	statement of affairs and plan which ditors and confirmation hearing, ar	may be required; and any adjourned h	earings thereof;	
	Negotiations with secured creditors t reaffirmation agreements and applica 522(f)(2)(A) for avoidance of liens on	tions as needed; preparation			
<b>6.</b>	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any any other adversary proceeding.			ces, relief from sta	y actions or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of bankruptcy proceeding.	any agreement or arrangement for	payment to me fo	representation of the o	lebtor(s) in
F	ebruary 26, 2018	/s/ Daniel A. Sprii			
L	Oate Control of the C	Daniel A. Springe Signature of Attorne			
		Springer Law Fire	m		
		5301 E. State Stre Suite 105	eet		
		Rockford, IL 6110	08		
		815.312.4725 dspringerlaw@gi	mail com		
		Name of law firm	nan.com		<del></del>

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Desc Main

Springer Law Firm

2222 East State St. # 107, Rockford, IL

815.312.4725

### **CHAPTER 7 RETAINER AGREEMENT**

The undersigned agrees to hire Springer Law Firm to represent the undersigned in a Chapter 7 bankruptcy and agrees to the following terms and conditions:

- The attorney fees for the Chapter 7 bankruptcy are \$850. This is a flat fee arrangement, and does not
  include the court costs, which are currently \$335. This is the total of your attorney fees, and Springer Law
  Firm will not charge you for additional work. However, if you refuse to cooperate, or fail to provide
  information as requested by our attorney, your case may be closed.
- 2. Fees paid to the firm become property of the firm upon payment. If before the case is filed, you decide to close out your case, Springer Law Firm will refund you any fees not earned. I assign to Springer Law Firm any amount paid towards court costs and filing fees. I authorize Springer Law Firm to transfer said funds to the firm's operating account if I decide not to file for bankruptcy, or if I breach this contract.
- 3. I agree to disclose all pertinent information to Springer Law Firm, so that the firm can properly disclose all my assets, debts, and financial history to the court. I agree to keep the firm informed on any new assets or debts I may incur from this date forward. If I do not provide the proper information, or do not cooperate with Springer Law Firm, said firm may withdraw from representation, with permission of the court.
- 4. I understand that I may not be able to protect all of my property. The bankruptcy code does not provide exemptions for everything, and as such, some of my property may be taken by the Trustee and sold. Additionally, if my income is too high, or if my income is not offset enough by my expenses, I understand that the Trustee may dismiss my case, or require me to file a Chapter 13 instead of a Chapter 7.
- 5. I understand that not all of my debts may be discharged in a Chapter 7 bankruptcy. Student loans, educational debts, undisclosed debt, support/maintenance, fines, debts incurred by fraud, future association/condo HOA dues, certain tax debts, or debts found non-dischargeable by a Judge are among the debts not dischargeable.
- 6. I understand that this retainer agreement is for bankruptcy representation only. Springer Law Firm will not represent me in any other case or legal matter, unless agreed to in a separate retainer agreement. This includes adversary proceedings that may fall under the bankruptcy case. This agreement does not include representation in such adversary proceedings.
- 7. I understand that all money paid towards attorney fees is non-refundable. I understand that once I pay Springer Law, that Springer Law begins work on my case. I understand that the majority of bankruptcy work is done prior to the filing of the case, and because of this the fees are earned even before the filing of the case.
- 8. I understand that before I transfer or sell any property, or incur any new debt, I will first notify Springer Law Firm and consult on the impact such action will have on my bankruptcy.
- 9. I understand that I must take 2 classes pertaining to financial management and credit counselling. Failure to take these courses will result in either my case NOT being filed, or if filed, possibly dismissed. If my case is dismissed, I understand that I will have to pay to have my case re-opened by Springer Law Firm.
- 10. I have received the 11 U.S.C. § 527(a) disclosures and have read them.

Dated:_	2	126	18

Signature: Juhn Cerasani
Print Name: Joseph D Cerasani

Attorney Print: M. Chall Blosenhad

## **United States Bankruptcy Court**Northern District of Illinois

		Torthern District of Immors		
In re	Joseph D. Cerasani		Case No.	
		Debtor(s)	Chapter 7	
	VI	ERIFICATION OF CREDITOR M.	ATRIX	
		Number of	Creditors:	22
	The above-named Debtor(s (our) knowledge.	) hereby verifies that the list of credito	ors is true and correct	to the best of my
Date:	February 26, 2018	/s/ Joseph D. Cerasani Joseph D. Cerasani		

Atlantic Credit & Finance Inc. PO Box 2083 Warren, MI 48090

Blitt & Gaines PC 661 Glenn Ave Wheeling, IL 60090

Cavalry Portfolio Serv Po Box 27288 Tempe, AZ 85285

Chase Auto
P.o. Box 901003
Fort Worth, TX 76101

Constance Augsburger 516 Fourth Avenue P.O. Box 358 Rochelle, IL 61068

Contract Callers Inc Contract Callers Inc. Cci Augusta, GA 30901

D&A Services 1400 E. Touhy Ave. Suite G2 Des Plaines, IL 60018

Dennis Brebner & Associates Attn: Bankruptcy Dept. 860 Northpoint Blvd Waukegan, IL 60085

Dept Of Education/neln 121 S 13th St Lincoln, NE 68508

Folk Law LLC PO BOX 375 Oregon, IL 61061 GC Services Limited Partnership Dept. HOVS 051 PO Box 3044 Livonia, MI 48151-3044

H&R Accounts Attn: Bankruptcy Dept. PO Box 672 Moline, IL 61266-0672

Health Alliance 301 S. Vine Street Urbana, IL 61801

Metlife Auto & Home PO BOX 41753 Philadelphia, PA 19101

Midland Funding, LLC Attn: Bankruptcy Dept. 2365 Northside Drive, Suite 300 San Diego, CA 92108

Sears/CBNA Attn: Bankruptcy Dept. PO Box 6189 Sioux Falls, SD 57117

State Collection Servi 2509 S Stoughton Rd Madison, WI 53716

Stillman Bank 101 East Main Street PO Box 150 Stillman Valley, IL 61084

Swedish American Medical Group Attn: Bankruptcy Dept. PO Box 1567 Rockford, IL 61110

SwedishAmerican Hospital Attn: Bankruptcy Dept. PO Box 310283 Des Moines, IA 50331 SYNCB/Care Credit Attn: Bankruptcy Dept PO BOX 960061 Orlando, FL 32896

Village Capital/dovnem 1 Corporate Drive Lake Zurich, IL 60047